

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	09/662,965
Filing Date	September 15, 2000
First Named Inventor	Irick, Jr. et al.
Art Unit	1712
Examiner Name	Short, P.
Attorney Docket Number	05015.0365U1

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. Request for Continued Examination (RTCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submission required under 37 CFR § 1.114

- a. ☐ Previously submitted
- i. ☐ Consider the amendment(s) reply under 37 C.F.R. § 1.116 previously filed on _____
(Any unentered amendment(s) referred to above will be entered.)
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
- iii. ☐ Other _____
- b. ☒ Enclosed:
- i. ☒ Amendment/Reply
- ii. ☒ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure Statement (IDS)
- iv. ☒ Other: Request for 1 Month Extension of Time Exhibits (A - D)

2. Miscellaneous

- a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR § 1.17(i) required)
- b. ☐ Other -

3. Fees

- The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. 1.114 when the RCE is filed.
- a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 14-0629.
- i. ☒ RCE fee required under 37 C.F.R. § 1.17(e)
- ii. ☒ Extension of time fee (37 C.F.R. §§ 1.136 and 1.17)
- iii. ☐ Other _____
- b. ☐ Check in the amount of \$ _____ enclosed
- c. ☒ Payment in the amount of \$850.00 is to be charged to a credit card (Form PTO-2038 enclosed)

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED

Name (Print/Type)	Jacqueline M. Hutter	Registration No. (Attorney/Agent)	44,792
Signature	<i>Jacqueline M. Hutter</i>	Date	August 8, 2003

CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. § 1.8

I hereby certify that this correspondence is being sent via facsimile transmission addressed to (703) 908-2395, Attention: Examiner P. Short, Mail; Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicate below. 892-9311

Name (Print/Type)	Jacqueline M. Hutter	Date	August 8, 2003
Signature	<i>Jacqueline M. Hutter</i>		

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